

Fill in this information to identify the case:**Debtor name:** Trinitas Advantaged Agriculture Partners IV, LP, et al.**United States Bankruptcy Court for the:** Northern District of California**Case number (if known):** 24-50211☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims**1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).**☐ No. Go to Part 2.☒ Yes. Go to line 2.**2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part.** If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

2.1.	Priority creditor's name and mailing address CONTRA COSTA COUNTY TAX COLLECTOR 2530 ARNOLD DR STE 100 MARTINEZ CA 94553	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Total claim \$15,442.47	Priority amount \$15,442.47
	Date or dates debt was incurred VARIOUS	Basis for the claim: REAL PROPERTY TAXES		Nonpriority amount \$0.00
	Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.2.	Priority creditor's name and mailing address FRESNO COUNTY TAX COLLECTOR 1720 S MAPLE AVE FRESNO CA 93702	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Total claim \$3,110.03	Priority amount \$3,110.03
	Date or dates debt was incurred VARIOUS	Basis for the claim: REAL PROPERTY TAXES		Nonpriority amount \$0.00
	Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.3.	Priority creditor's name and mailing address SAN JOAQUIN COUNTY - TAX COLLECTOR 44 N SAN JOAQUIN ST SECOND FL STE 230 STOCKTON CA 95202 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: REAL PROPERTY TAXES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Total claim \$28,153.28	Priority amount \$28,153.28 Nonpriority amount \$0.00
2.4.	Priority creditor's name and mailing address SOLANO COUNTY TAX COLLECTOR 675 TEXAS ST STE 2700 FAIRFIELD CA 94533-6338 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: REAL PROPERTY TAXES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Total claim \$38,073.03	Priority amount \$38,073.03 Nonpriority amount \$0.00
2.5.	Priority creditor's name and mailing address TULARE COUNTY TAX COLLECTOR 221 S MOONEY BLVD RM 102-E VISALIA CA 93291-4593 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: REAL PROPERTY TAXES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Total claim \$24,224.23	Priority amount \$24,224.23 Nonpriority amount \$0.00

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

3.1.	Nonpriority creditor's name and mailing address AG PRODUCTION CO. PO BOX 1325 TURLOCK CA 95381	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$6,620.16
	Date or dates debt was incurred 1/18/2024	Basis for the claim: TRADE PAYABLE	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2.	Nonpriority creditor's name and mailing address AG WATER CHEMICAL ROY SANCHEZ PO BOX 2595 FRESNO CA 93745-2595	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$16,968.74
	Date or dates debt was incurred 10/23/2023	Basis for the claim: TRADE PAYABLE	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.3.	Nonpriority creditor's name and mailing address ALTA IRRIGATION DISTRICT 289 NORTH L ST DINUBA CA 93618-0715	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$145.37
	Date or dates debt was incurred 2/1/2024	Basis for the claim: TRADE PAYABLE	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

3.4.	Nonpriority creditor's name and mailing address AMERICAN AG CREDIT ED ADAMS 400 AVIATION BLVD STE 100 SANTA ROSA CA 95403 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: NOTE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,000,000.00
3.5.	Nonpriority creditor's name and mailing address ARENTFOX SCHIFF LLP COLE FERGUSON 1717 K ST NW WASHINGTON DC 20006-5344 Date or dates debt was incurred 12/31/2023, 01/12/2024 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$79,986.00
3.6.	Nonpriority creditor's name and mailing address ASHYLAN LLC JENNIFER VARGAS 570 EL CAMINO REAL #150142 REDWOOD CITY CA 94063 Date or dates debt was incurred 1/31/2024 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: LEASE LIABILITY Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$275,260.84

3.7.	Nonpriority creditor's name and mailing address BATAM MANAGEMENT SVC INC AARON BATISTA 37905 MYRTLEWOOD DR MADERA CA 93636 Date or dates debt was incurred 11/29/2023, 12/13/2023 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$16,153.86
3.8.	Nonpriority creditor's name and mailing address BGM ELECTRONIC SVC LLC TERRY BISHOP 815 NORTH OPDYKEK BLDG 200 AUBURN HILLS MI 48326 Date or dates debt was incurred 10/23/2023 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$15,000.00
3.9.	Nonpriority creditor's name and mailing address BUTTONWILLOW WAREHOUSE CO PO BOX 744634 LOS ANGELES CA 90074-4634 Date or dates debt was incurred 1/31/2024 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$288.38

3.10.	Nonpriority creditor's name and mailing address CAL WEST RAIN INC BOBBY ESPINOZA PO BOX 306 KERNAN CA 93630-0306 Date or dates debt was incurred 01/31/2024, 12/15/2023, 11/16/2023, 11/22/2023, 11/28/2023, 10/31/2023 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$16,312.75
3.11.	Nonpriority creditor's name and mailing address CALIFORNIA INDUSTRIAL RUBBER CO MICHAEL ESPARZA PO BOX 2456 FRESNO CA 93745 Date or dates debt was incurred 01/16/2024, 01/19/2024, 12/31/2023, 01/12/2024, 11/21/2023, 11/27/2023, 11/28/2023, 10/18/2023, 10/27/2023, 10/30/2023, 11/07/2023, 11/13/2023, 11/29/2023 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$23,983.03
3.12.	Nonpriority creditor's name and mailing address CHICO NUT HULLING AND SHELLING LLC BILL WELLINGTON PO BOX 5365 CHICO CA 95927 Date or dates debt was incurred 10/31/2023 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$386,783.65

3.13.	Nonpriority creditor's name and mailing address DELLAVALLE LABORATORY INC 1910 W MCKINLEY STE 110 FRESNO CA 93728 Date or dates debt was incurred 3/5/2024 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$960.00
3.14.	Nonpriority creditor's name and mailing address DIXON / SOLANO RCD WATER COALITION 1170 N LINCOLN ST STE 110 DIXON CA 95620 Date or dates debt was incurred 2/1/2024 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3.86
3.15.	Nonpriority creditor's name and mailing address EAST BAY TIRE 2200 HUNTINGTON DR UNIT C FAIRFIELD CA 94533 Date or dates debt was incurred 01/18/2024, 01/19/2024, 12/19/2023, 01/11/2024 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$6,184.54

3.16.	Nonpriority creditor's name and mailing address FARM CREDIT LEASING 101326 NW 9675 PO BOX 1450 MINNEAPOLIS MN 55485 Date or dates debt was incurred 1/31/2024 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$9,901.17
3.17.	Nonpriority creditor's name and mailing address FARM CREDIT LEASING 101452 NW 9675 PO BOX 1450 MINNEAPOLIS MN 55485 Date or dates debt was incurred 1/31/2024 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,848.98
3.18. ¹	Nonpriority creditor's name and mailing address FARM CREDIT LEASING 103070 NW 9675 PO BOX 1450 MINNEAPOLIS MN 55485 Date or dates debt was incurred 1/31/2024 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: LEASE LIABILITY Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$11,087.81

3.19. ¹	Nonpriority creditor's name and mailing address FARM CREDIT LEASING 103481 NW 9675 PO BOX 1450 MINNEAPOLIS MN 55485 Date or dates debt was incurred 1/31/2024 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: LEASE LIABILITY Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$26,741.38
3.20. ¹	Nonpriority creditor's name and mailing address FARM CREDIT LEASING 103720 NW 9675 PO BOX 1450 MINNEAPOLIS MN 55485 Date or dates debt was incurred 1/31/2024 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: LEASE LIABILITY Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$8,086.03
3.21. ¹	Nonpriority creditor's name and mailing address FARM CREDIT LEASING 104968 NW 9675 PO BOX 1450 MINNEAPOLIS MN 55485 Date or dates debt was incurred 1/31/2024 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: LEASE LIABILITY Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$35,555.58

3.22. ¹	Nonpriority creditor's name and mailing address FARM CREDIT LEASING 110613 NW 9675 PO BOX 1450 MINNEAPOLIS MN 55485 Date or dates debt was incurred 1/31/2024 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: LEASE LIABILITY Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$34,299.47
3.23. ¹	Nonpriority creditor's name and mailing address FARM CREDIT LEASING 111452 NW 9675 PO BOX 1450 MINNEAPOLIS MN 55485 Date or dates debt was incurred 1/31/2024 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: LEASE LIABILITY Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$59,777.48
3.24. ¹	Nonpriority creditor's name and mailing address FARM CREDIT LEASING 111906 NW 9675 PO BOX 1450 MINNEAPOLIS MN 55485 Date or dates debt was incurred 1/31/2024 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: LEASE LIABILITY Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$31,992.20

3.25. ¹	Nonpriority creditor's name and mailing address FARM CREDIT LEASING 118059 NW 9675 PO BOX 1450 MINNEAPOLIS MN 55485 Date or dates debt was incurred 1/31/2024 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: LEASE LIABILITY Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$70,388.68
3.26. ¹	Nonpriority creditor's name and mailing address FARM CREDIT LEASING 118627 NW 9675 PO BOX 1450 MINNEAPOLIS MN 55485 Date or dates debt was incurred 1/31/2024 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: LEASE LIABILITY Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$135,126.26
3.27. ¹	Nonpriority creditor's name and mailing address FARM CREDIT LEASING 119224 NW 9675 PO BOX 1450 MINNEAPOLIS MN 55485 Date or dates debt was incurred 1/31/2024 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: LEASE LIABILITY Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$548,532.20

3.28. ¹	Nonpriority creditor's name and mailing address FARM CREDIT LEASING 121211 NW 9675 PO BOX 1450 MINNEAPOLIS MN 55485 Date or dates debt was incurred 1/31/2024 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: LEASE LIABILITY Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$51,615.48
3.29. ¹	Nonpriority creditor's name and mailing address FARM CREDIT LEASING 5299785-5000 NW 9675 PO BOX 1450 MINNEAPOLIS MN 55485 Date or dates debt was incurred 1/31/2024 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: LEASE LIABILITY Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$44,286.84
3.30.	Nonpriority creditor's name and mailing address FARM CREDIT LEASING- 99804 NW 9675 PO BOX 1450 MINNEAPOLIS MN 55485 Date or dates debt was incurred 2/1/2024 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$0.85

3.31.	Nonpriority creditor's name and mailing address FASTENAL COMPANY PO BOX 1286 WINONA MN 55987-1286 Date or dates debt was incurred 12/21/2023, 12/31/2023, 11/22/2023, 11/27/2023, 12/01/2023 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$7,945.24
3.32.	Nonpriority creditor's name and mailing address FIRST CHOICE INDUSTRIAL SUPPLY INC PO BOX 2072 OAKDALE CA 95361 Date or dates debt was incurred 12/19/2023, 12/05/2023 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$9,577.90
3.33.	Nonpriority creditor's name and mailing address FIRST NATIONAL BANK OF OMAHA 1620 DODGE ST OMAHA NE 68197 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: CREDIT CARD STATEMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$74,137.40

3.34. ¹	Nonpriority creditor's name and mailing address FORD CREDIT 1501 NORTH PLAN ROAD SUITE 100 RICHARDSON TX 75081 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: VEHICLE DEBT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$72,034.00
3.35.	Nonpriority creditor's name and mailing address FRONTIER PERFORMANCE LUBRICANTS INC 600 INDUSTRIAL WAY GALT CA 95632 Date or dates debt was incurred 01/16/2024, 12/31/2023, 10/13/2023, 11/10/2023 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$8,939.50
3.36.	Nonpriority creditor's name and mailing address GAR BENNETT LLC KURTIS DOUGLAS PO BOX 31001 3026 PASADENA CA 91110 Date or dates debt was incurred 01/15/2024, 02/01/2024, 03/01/2024, 12/07/2023, 12/11/2023, 12/21/2023, 11/06/2023, 11/16/2023, 12/01/2023 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$152,823.23

3.37.	Nonpriority creditor's name and mailing address GROW WEST 201 EAST ST WOODLAND CA 95776 Date or dates debt was incurred 12/1/2023 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$75,375.01
3.38.	Nonpriority creditor's name and mailing address JOSE MARIO TORRES BJ AND D PC OLIVER A TAILLIEU ESQ 9701 WILSHIRE BLVD 12TH FL BEVERLY HILLS CA 90212 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.39.	Nonpriority creditor's name and mailing address KAMPER AG AND AUTO 18665 JACK TONE RD MANTECA CA 95336 Date or dates debt was incurred 12/1/2023 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$6,835.25

3.40.	Nonpriority creditor's name and mailing address LAKE MANAGEMENT COMPANY INC CEIL HOWE III 470 E HERNDON AVE STE 101 FRESNO CA 93720 Date or dates debt was incurred 03/01/2024, 01/31/2024 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$62,126.46
3.41.	Nonpriority creditor's name and mailing address LAWRENCE TRACTOR CO INC HECTOR MERCADO 2436 E VLY OAKS DR VISALIA CA 93292 Date or dates debt was incurred 10/11/2023, 10/17/2023, 10/18/2023, 10/19/2023, 10/24/2023, 10/26/2023, 12/01/2023 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$17,548.34
3.42.	Nonpriority creditor's name and mailing address LMG AG PRODUCTS PO BOX 2139 TULARE CA 93275 Date or dates debt was incurred 03/01/2024, 03/04/2024, 01/31/2024, 11/22/2023 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$55,227.18

3.43.	Nonpriority creditor's name and mailing address LOCKWOOD SEED AND GRAIN BOB SAMUELSON 26777 N CHOWCHILLA BLVD CHOWILLA CA 93610 Date or dates debt was incurred 12/1/2023 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$50,054.50
3.44.	Nonpriority creditor's name and mailing address MARCOS GALVAN MARTINEZ BIBIYAN LAW GROUP PC DAVID B BIBIYAN ESQ 8484 WILSHIRE BLVD STE 500 BEVERLY HILLS CA 90211 Date or dates debt was incurred _____ Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.45.	Nonpriority creditor's name and mailing address MARFAB AG AND INDUSTRIAL SUPPLIES 1025 I ST LOS BANOS CA 93635 Date or dates debt was incurred FROM 10/03/2023 THROUGH 01/31/2024 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$12,334.79

3.46.	Nonpriority creditor's name and mailing address MERCED COUNTY DEPT OF PUBLIC WORKS 345 WEST 7TH ST MERCED CA 95341	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$180.00
	Date or dates debt was incurred 11/20/2023	Basis for the claim: TRADE PAYABLE	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.47.	Nonpriority creditor's name and mailing address MID VALLEY AGRICULTURAL SVC INC PO BOX 728 OAKDALE CA 95361-0728	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$2,056.25
	Date or dates debt was incurred 2/1/2024	Basis for the claim: TRADE PAYABLE	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.48.	Nonpriority creditor's name and mailing address MOSS ADAMS LLP PO BOX 101822 PASADENA CA 91189-1822	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$1,470.00
	Date or dates debt was incurred 2/20/2024	Basis for the claim: TRADE PAYABLE	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

3.49.	Nonpriority creditor's name and mailing address NUTRIEN AG SOLUTIONS STOCKTON CHARLES TARBELL PO BOX 188 STOCKTON CA 95205 Date or dates debt was incurred 02/16/2024, 12/14/2023, 12/14/2023, 11/09/2023 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$332,421.53
3.50.	Nonpriority creditor's name and mailing address NUTRIEN AG SOLUTIONS VISALIA PO BOX 1067 VISALIA CA 93279 Date or dates debt was incurred 2/1/2024 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,231.64
3.51.	Nonpriority creditor's name and mailing address ORCHARD MACHINERY CORP BRIAN ANDERSEN 2700 COLUSA HIGHWAY YUBA CITY CA 95993 Date or dates debt was incurred 01/19/2024, 12/19/2023, 01/05/2024, 01/11/2024, 01/12/2024, 11/16/2023, 11/20/2023, 11/21/2023, 12/01/2023, 12/05/2023, 12/08/2023 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$25,690.61

3.52.	Nonpriority creditor's name and mailing address OSSENT JUK AND BOTTI 2815 TOWNSGATE RD STE 320 WESTLAKE VILLAGE CA 91360 Date or dates debt was incurred 2/5/2024 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,045.00
3.53.	Nonpriority creditor's name and mailing address OSSENT JUK AND BOTTI 2815 TOWNSGATE RD STE 320 WESTLAKE VILLAGE CA 91360 Date or dates debt was incurred 02/02/24-02/12/24 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$3,410.00
3.54.	Nonpriority creditor's name and mailing address POMONA FARMING, LLC RYON PATON 2055 WOODSIDE RD STE 195 REDWOOD CITY CA 94061 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$11,744,822.00

3.55.	Nonpriority creditor's name and mailing address RECLAMATION DISTRICT NO 2068 7178 YOLANO RD DIXON CA 95620	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$1,000.00
	Date or dates debt was incurred 2/12/2024	Basis for the claim: TRADE PAYABLE	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.56.	Nonpriority creditor's name and mailing address SCOTT BELKNAP WELL DRILLING INC 38193 RD 76 DINUBA CA 93618	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$8,245.00
	Date or dates debt was incurred 11/14/2023	Basis for the claim: TRADE PAYABLE	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.57.	Nonpriority creditor's name and mailing address SCS GLOBAL SVC 2000 POWELL ST STE 600 EMERYVILLE CA 94608	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$7,054.00
	Date or dates debt was incurred 12/18/2023	Basis for the claim: TRADE PAYABLE	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

3.58.	Nonpriority creditor's name and mailing address SOUTH VALLEY COMPANIES INC CAMILLA NORMAN PO BOX 82543 BAKERSFIELD CA 93380 Date or dates debt was incurred 10/23/2023 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$286,631.42
3.59.	Nonpriority creditor's name and mailing address SOUTHERN CALIFORNIA EDISON 1201 K ST #1810 SACRAMENTO CA 95814 Date or dates debt was incurred 02/23/2024, 02/26/2024, 02/28/2024 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,632.62
3.60.	Nonpriority creditor's name and mailing address SPERANTUS ARRIOLA BUSINESS GROUP INC CLAUDIO ARRIOLA 2323 AVENIDA COSTA ESTE STE 500 SAN DIEGO CA 92154 Date or dates debt was incurred 1/15/2024 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$22,578.77

3.61.	Nonpriority creditor's name and mailing address STANISLAUS FARM SUPPLY MIKE DOXEY 624 E SERVICE RD MODESTO CA 95358 Date or dates debt was incurred 02/08/2024, 12/18/2023, 01/31/2024 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$34,577.79
3.62.	Nonpriority creditor's name and mailing address SUPERIOR SOIL SUPPLEMENTS LLC MICHAEL FRANKFORT COULT DENNIS 10367 HOUSTON AVE HANFORD CA 93230 Date or dates debt was incurred 10/20/2023, 10/27/2023, 10/31/2023 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$80,249.76
3.63. ¹	Nonpriority creditor's name and mailing address THE HARVESTING GROUP ERIN MCILHATTON 470 E HERNDON STE 200 FRESNO CA 93720 Date or dates debt was incurred 1/31/2024 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: LEASE LIABILITY Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$4,891,213.66

3.64.	Nonpriority creditor's name and mailing address THE HULLING COMPANY SCOTT A EASTOM 19482 RD 19 MADERA CA 93637 Date or dates debt was incurred 1/4/2024 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$212,738.12
3.65.	Nonpriority creditor's name and mailing address TM SIGNS AND GRAPHICS 3232 RIO MIRANDA STE C2 BAKERSFIELD CA 93308 Date or dates debt was incurred 12/1/2023 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$858.35
3.66.	Nonpriority creditor's name and mailing address TULARE LAKE BASIN WATER STORAGE DISTRICT 1001 CHASE AVENUE CORCORAN CA 93212 Date or dates debt was incurred 2/13/2024 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$2,805.17

3.67.	Nonpriority creditor's name and mailing address UNITED RENTALS NOLAN OBRIEN FILE 51122 LOS ANGELES CA 90074-1122 Date or dates debt was incurred 02/17/2024, 02/24/2024, 01/16/2024, 01/20/2024, 01/27/2024, 12/22/2023, 12/23/2023, 12/31/2023, 11/25/2023, 12/02/2023, 12/13/2023 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$38,754.57
3.68.	Nonpriority creditor's name and mailing address V AND Z SHREDDING JACOB ZENSEN PO BOX 64 EMPIRE CA 95319 Date or dates debt was incurred 10/31/2023 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$48,868.00
3.69.	Nonpriority creditor's name and mailing address VALLEY HYDRAULICS AND MACHINE 1249 E KENTUCKY AVE WOODLAND CA 95776 Date or dates debt was incurred 1/1/2024 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$7.63

3.70.	Nonpriority creditor's name and mailing address VILLARREAL HEDGING AND TOPPING INC PO BOX 64 EMPIRE CA 95319 Date or dates debt was incurred 12/1/2023 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$11,835.00
3.71.	Nonpriority creditor's name and mailing address WESTLAKE FARMS INC CEIL HOWE III 23311 NEWTON AVE STRATFORD CA 93266-9732 Date or dates debt was incurred 03/01/2024, 12/15/2023, 12/31/2023, 01/01/2024, 12/01/2023 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$587,616.92
3.72.	Nonpriority creditor's name and mailing address WESTSIDE EQUIPMENT NICOLAUS HANSEN PO BOX 158 CROWS LANDING CA 95313 Date or dates debt was incurred 01/15/2024, 01/17/2024, 12/31/2023, 10/17/2023, 10/30/2023, 12/01/2023 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$30,606.59

3.73.	Nonpriority creditor's name and mailing address WILSON'S POWERSPORTS 100 EAST 6TH ST MADERA CA 93638	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$277.78
	Date or dates debt was incurred 1/23/2024	Basis for the claim: TRADE PAYABLE	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.74.	Nonpriority creditor's name and mailing address WL OLIVES, LLC 2055 WOODSIDE RD STE 195 REDWOOD CITY CA 94061	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Amount of claim \$3,364,506.89
	Date or dates debt was incurred VARIOUS	Basis for the claim: NOTE PAYABLE	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

¹MAY ALSO APPEAR ON SCHEDULES D AND/OR G WHEN THE DEBTORS FILE THEIR REMAINING SCHEDULES, DEPENDING ON THEIR ULTIMATE CHARACTERIZATION, WHICH DEBTORS HAVE NOT YET DETERMINED.

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
CLARK HILL PLC KEVIN H MORSE 130 EAST RANDOLPH ST.,STE 3900 CHICAGO IL 60601	Part 2 line 3.64	_____
CONTRA COSTA COUNTY TAX COLLECTOR PO BOX 51104 LOS ANGELES CA 90051-5404	Part 1 line 2.1	_____
FRESNO COUNTY TAX COLLECTOR PO BOX 1192 FRESNO CA 93715-1192	Part 1 line 2.2	_____
SAN JOAQUIN COUNTY - TAX COLLECTOR PO BOX 2169 STOCKTON CA 95201-2169	Part 1 line 2.3	_____
SOLANO COUNTY TAX COLLECTOR PO BOX 51094 LOS ANGELES CA 90051-5394	Part 1 line 2.4	_____
TULARE COUNTY TAX COLLECTOR PO BOX 102495 PASADENA CA 91189-0118	Part 1 line 2.5	_____

Part 4:

Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

Total of claim amounts		
5a. Total claims from Part 1	5a.	\$109,003.04
5b. Total claims from Part 2	5b. +	\$26,267,235.46
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	5c.	\$26,376,238.50